

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 2/19/032 Serial/Patent # 09/371,463

3 Please refund the following fee(s):

4 PAPER
NUMBER5 DATE
FILED

6 AMOUNT

☒ Filing (RCE)

\$ 750.

Amendment

\$

Extension of Time

\$

Notice of Appeal/Appeal

\$

Petition

\$

Issue

\$

Cert of Correction/Terminal Disc.

\$

Maintenance

\$

Assignment

\$

Other

\$

7 TOTAL AMOUNT
OF REFUND

\$ 750.

8 TO BE REFUNDED BY:

Treasury Check

Credit Deposit A/C #:

10 REASON:

Overpayment

Duplicate Payment

No Fee Due (Explanation):

Improper RCE

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME:

TITLE: RJSIGNATURE: Fabrice BondPHONE: 308-6911OFFICE: Office of Petitions*****
THIS SPACE RESERVED FOR FINANCE USE ONLY:APPROVED: Alicia KilleDATE: 2/20/03

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802E

BEST AVAILABLE COPY